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Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
		Application Number	10/566,975-Conf. #2874
		Filing Date	November 16, 2006
		First Named Inventor	Vesa MYLLYMAEKI
		Examiner Name	L. D. Bland
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Art Unit	1623
TOTAL AMOUNT OF PAYMENT (\$ 1300.00)		Attorney Docket No.	0696-0229PUS1

METHOD OF PAYMENT (check all that apply)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number		02-2448
Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description	Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Small Entity Fee (\$)	
Each claim over 20 (including Reissues)	_____	_____	_____	_____	_____	52 26	
Each independent claim over 3 (including Reissues)	_____	_____	_____	_____	_____	220 110	
Multiple dependent claims	_____	_____	_____	_____	_____	390 195	
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
_____	_____	/50 = _____ (round up to a whole number) x _____ = _____		_____	_____		
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)		
_____	_____	_____	_____	_____	_____		
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
_____	_____	/50 = _____ (round up to a whole number) x _____ = _____		_____	_____		
- 100 = _____	/50 = _____						
4. OTHER FEE(S)							
Non-English Specification,	RCE Filing Fee			810.00			
Other (e.g., late filing surcharge):	Petition Fee			130.00			
Extension for response within second month			360.00**				

SUBMITTED BY						
Signature			Registration No. (Attorney/Agent)	21,066	Telephone	(703) 205-8012
Name (Print/Type)	Raymond C. Stewart		Date	November 17, 2008		

**First Extension Fee Paid on October 16, 2008